2 IN ETHING AND

CHECK ONE: This is an Initial* Statement of Organization This is an amended* Statement of Organization An initial Statement of Organization must be filed within 10 days of the commaking expenditures, or incurring indebtedness exceeding \$750. Amendma a change. Panalities may be imposed for lete-filed Statements of Organization a change. Panalities may be imposed for lete-filed Statements of Organization committee that exceeds \$750 in activity for another office shall file within 10 DR-1 disclosing information concerning the campaign for the new office sout COMMITTEE NAME \$\psi\$ (A candidate's committee must include the \$\inc \inc \infty \inother \infty \infty \infty \infty \infty \infty \infty \infty \in	ons must be filed within 30 days of on. A candidate with an open days either a new or amended ght. candidate's last name in the name of the candidate in the candidate in the name of the candidate in the candidate in the candidate with an open of the candidate with a	County Central Co.	num ittee
COMMITTEE TREASURER (mandatory for all committees)	st wood (meaning committee invol	ved in muniple city	county ballot issues)
Name + + 7)	COMMITTEE CHAIR (mands	tory except for a cu	indidate's committee)
Mailing Address + 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Name 4 4		
Mailing Address + 605 6 th Ave NE	Mailing Address ↓ ↓		
City, State + Zip Code + TA 50525	City, State ↓ ↓ Zip Code ↓ ↓		
Phone (5/5) 532 - 9/56	Phone ()		
c-Mail			
INDICATE PURPOSE OF COMMITTEE - Check One Box XI Advancate for footiers appetite to the control of the control			
Comment or description:	I I Adv	vocate against hallot	lecuso(a)
All Candidates Enter: Supervisor	County/Local Candidates ал	d Local Ballot Com	mittees Enter:
Delition Destruction of the Dest	County: Wright (If active in multiple ballyt issue	L	
Political Party (If applicable) Tnde Dendent	(If active in multiple ballet issue	e elections, attach lis	t of counties
District: United Stanting 11-41-00			
Year Standing for Election: Sank Account Name (must match committee name)		<u> </u>	
DISON FOR Supervisor Name of Financial Institution/type of Account FIRST Citizens Nat'l Bank Mailing Address 120 187 Ave Nw City + State + Zip + +	Larry E	St NZ State + +	
Clarion IA 50525	e-Mail 100 Kon@go		eess.net
STATEMENT OF AFFIRMATION: By filing this document the committee affirm	e-Mail 100 Ron @go) ne the following:	18 fieldace	
STATEMENT OF AFFIRMATION: By filing this document the committee affirm 1. The committee and all persons connected with the committee understand that if	e-Mail 100 Ron @go) ne the following:	18 fieldace	
STATEMENT OF AFFIRMATION: By filing this document the committee affirm 1. The committee and all persons connected with the committee understand that the rules in Chapter 351 of the lowa Administrative Code. 2. That lowa Code section 68A,402 and rule 351—4.9 require the filing of disclosure bublects the candidate or chairperson (in the case of committees other than a candidate).	e-Mail 100 Ron @go) me the following: mey are subject to the laws in lows Code The through and that the failure to file these	Chapters 68A and 68	5 and the administrative
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